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**TRANSMITTAL  
FORM**

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Total Number Of Pages In This Submission

Application Number

10/627,680

Filing Date

7/28/2003

First Named Inventor

ATANASOV

Group Art Unit

2816

Examiner Name

Not yet determined

Attorney Docket No.

A213 1010.1

**ENCLOSURES (check all that apply)**

- |   |  |   |
|---|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form                        | <input type="checkbox"/> Assignment Papers<br>(for an Application)                         | <input type="checkbox"/> After Allowance Communication to Group                               |
| <input type="checkbox"/> Fee Attached   | <input checked="" type="checkbox"/> Drawing(s)   | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences           |
| <input checked="" type="checkbox"/> Amendment / Reply                           | <input type="checkbox"/> Licensing-related Papers  | <input type="checkbox"/> Appeal Communication to Group<br>(Appeal Notice, Brief, Reply Brief) |
| <input type="checkbox"/> After Final  | <input type="checkbox"/> Petition  | <input type="checkbox"/> Proprietary Information  |
| <input type="checkbox"/> Affidavits/declarations                                | <input type="checkbox"/> Petition to Convert to a Provisional Application                  | <input type="checkbox"/> Status Letter  |
| <input type="checkbox"/> Extension of Time Request                              | <input type="checkbox"/> Power of Attorney, Revocation<br>Change of Correspondence Address | <input type="checkbox"/> Other Enclosure(s) (please identify below):                          |
| <input type="checkbox"/> Express Abandonment Request                            | <input type="checkbox"/> Terminal Disclaimer   | 1.  |
| <input type="checkbox"/> Information Disclosure Statement                       | <input type="checkbox"/> Request for Refund  |   |
| <input type="checkbox"/> Certified Copy of Priority Document(s)                 | <input type="checkbox"/> CD, Number of CD(s) _____   |   |
| <input type="checkbox"/> Response to Missing Parts/<br>Incomplete Application   | Remarks <input type="checkbox"/>   |   |
| <input type="checkbox"/> Response to Missing Parts<br>under 37 CFR 1.52 or 1.53 |  |   |

**SIGNATURE OF APPLICANT, ATTORNEY OR AGENT**Firm  
Or  
Individual NameCustomer No. 26158  
Womble Carlyle Sandridge & Rice, LLC  
P.O. Box 7037  
Atlanta, Georgia 30357-0037  
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Signature

Nanda K. Alapati

39,893

Date

April 22, 2004

**CERTIFICATE OF FACSIMILE TRANSMITTAL**

I hereby certify that this correspondence is being sent by facsimile to the United States Patent and Trademark Office, at fax number 703-872-9306 (USPTO Customer Window) on \_\_\_\_\_.

Kathleen J. Farrar

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U.S. Serial No. 10/627,680  
Atty Docket A213 1010.1

IN THE U.S. PATENT AND TRADEMARK OFFICE

<b>Application No.:</b> 10/627,680	<b>Confirmation No.</b> 4613
<b>Application of:</b> ATANASOV	<b>Group Art Unit:</b> 2816
<b>Filing Date:</b> 7/28/2003	<b>Examiner:</b> Not yet determined
<b>Title:</b> Optical Monitoring of Thin Film Deposition	<b>Docket No.</b> A213 1010.1 <b>Customer No.</b> 26158

**SUBMISSION OF FORMAL DRAWINGS**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir or Madam:

Applicant hereby submits, for inclusion in the record, formal drawings. The formal drawings included herewith comprise (10) drawing sheets, illustrating Figures (1) through (9b).

No fee is believed to be due for this submission. Should a fee be required, the Commissioner is authorized to charge any such fee to Womble Carlyle's Deposit Account No. 09-0528.

Respectfully Submitted,

Date: April 22, 2004

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